New hydrophilic catheter HCPCS codes will be effective January 1, 2026 - Are you ready?

November 4, 2025

	January 2026					
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
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Speakers



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Agenda

- 1. New HCPCS codes for hydrophilic coated intermittent catheters
- 2. Importance of internal and payor education
- 3. Medicare coverage criteria proposed urological supplies LCD
- 4. Medicare prescription guidance for hydrophilic catheters
- 5. Steps you can take to be prepared
- 6. Resources available
- 7. Q & A





New HCPCS codes for hydrophilic coated intermittent catheters





Intermittent catheters (ICs) 101:

- Single-use¹ medical device that is inserted through the urethra to drain the bladder 4-6 times daily² (~1,825 per year)
- Covered by Medicare under the "prosthetic device benefit" category
- Utilized by individuals with permanent urinary retention and/or permanent urinary incontinence, including those with neurogenic lower urinary tract dysfunction (NLUTD)
 - Spinal cord injury, spina bifida, multiple sclerosis,
 Parkinson's, late-stage diabetes, stroke, cancer, enlarged prostate (BPH), prolapse⁴
 - Urinary tract infections (UTI) are a major burden for individuals with NLUTD⁵
- Catheter choice is complex and multi-factorial



^{1.} U.S. Food and Drug Administration. Reprocessing of single-use medical devices: Information for health Care facilities. Reprocessing Single-Use Medical Devices: Information for Health Care Facilities | FDA

^{5.} Welk, B., Lenherr, S., Santiago-Lastra, Y., Norman, H. S., Keiser, M. G., & Elliott, C. S. (2022). Differences in the incidence of urinary tract infections between neurogenic and non-neurogenic bladder dysfunction individuals performing intermittent catheterization. Neurourology and Urodynamics, 1–10. doi: 10.1002/nau.24914





^{2.} Lauridsen SV, V. R., Chagani, S., Daniels, A. et al (2024). Evidence-based guidelines for best practice in urological health care: Urethral intermittent catheterisation in adults, including urethral intermittent dilatation. European Association of Urology Nurses. Retrieved January 3, 2025 from https://nurses.uroweb.org/wp-content/uploads/EAUN-Guideline-indwelling-catheterisation-2024.pdf

^{3.} Social Security Administration. (n.d.). Social Security Act §1861. https://www.ssa.gov/OP_Home/ssact/title18/1861.htm

^{4.} American Association for Homecare. (2022). The Critical Need to Provide Intermittent Catheter Urological Supplies Specific to Patient Need to Improve Health Outcomes (July 12, 2022). Retrieved from <a href="https://aahomecare.org/files/galleries/The Critical Need to Provide Intermittent Catheter Urological Supplies Specific to Patient Need to Improve Health Outcomes 07 22.pdf

AAHomecare's Intermittent Catheter Coding Reform Coalition (ICCRC) addressed IC HCPCS challenges

- Currently, 1,300 products¹ constrained into 3 HCPCS codes, meaning:
 - Not enough product differentiation
 - Does not accurately demonstrate the advancements in catheter innovation
- A multi-stakeholder coalition led by AAHomecare, focused on protecting access to catheters, applied for new HCPCS codes to recognize various catheter technologies in July 2022





















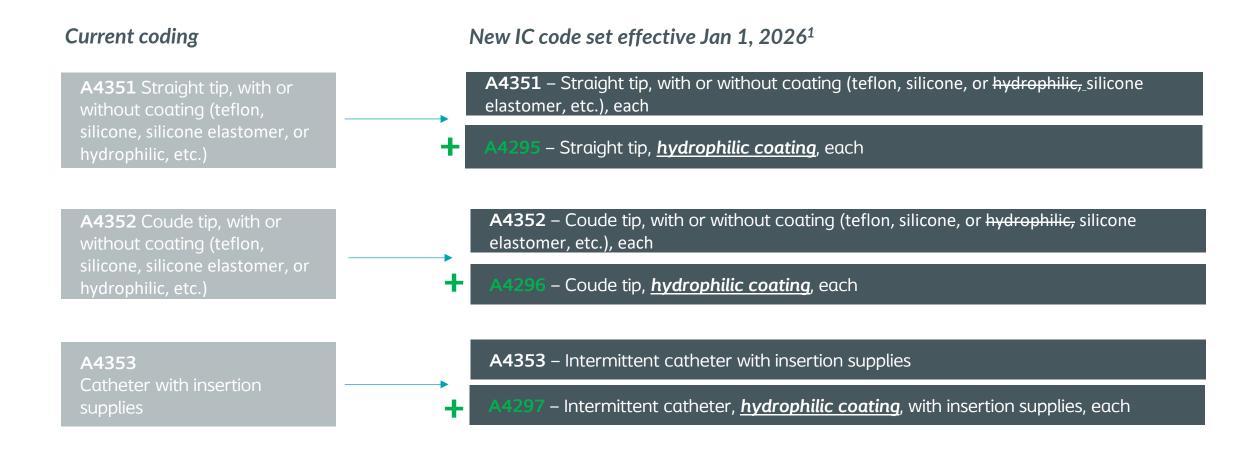
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CMS published a final decision in August 2024, revising current codes, effective January 1, 2026





CMS created 3 new and modified 2 HCPCS codes to distinguish hydrophilic coating technology effective January 1, 2026







CMS is bound by continuity of pricing regulation, therefore Medicare reimbursement rates for new codes are cross-walked



Regulatory requirement prohibits CMS from changing reimbursement rates for the new codes

§ 414.236 (b) 'Continuity of pricing when HCPCS codes are divided or combined'

"When there is a single code that describes two or more distinct complete items (for example, two different but related or similar items), and separate codes are subsequently established for each item, the fee schedule amounts that applied to the single code continue to apply to each of the items described by the new codes."







Importance of internal and payor education





Action is required to implement new codes with payors and to secure supportive reimbursement with commercial payors

- Implement new HCPCS codes with payors to avoid disruption to patient access
 - Ensure ongoing access to medically necessary hydrophilic coated ICs
 - Support access for members with multiple health plans or who have Medicare as primary
 - Reduce financial and administrative burden for cross-over claims
- Obtain supportive reimbursement for hydrophilic catheters
 - Review contracts and current reimbursement rates
 - Discuss 'Carve-Out opportunities' for A4295, A4296 and A4297

Requests prior to 1/1/2026:

- ✓ Implement 3 new HCPCS codes (A4295, A4296, A4297)
- ✓ Revise the definitions of A4351 and A4352 (remove hydrophilic)
- ✓ Assign adequate reimbursement to ensure access to hydrophilic coated intermittent catheters

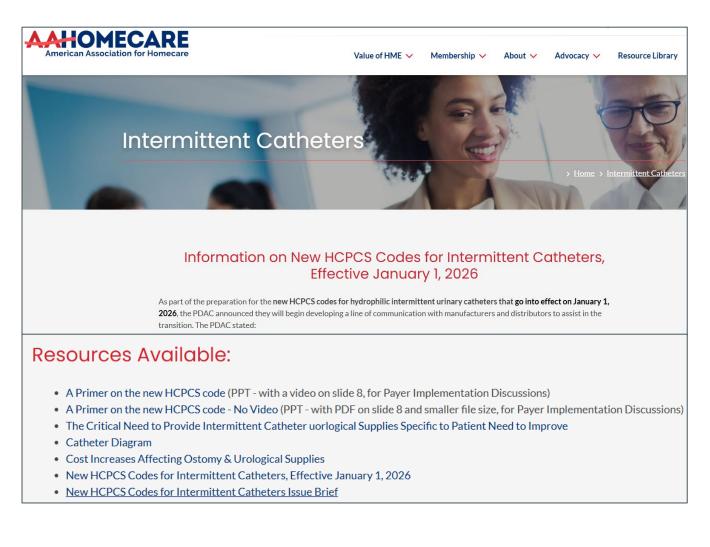




ICCRC payor resources for DME providers

- Payor brief
- Payor value prop
- Society support letter
- Catheter diagram
- Urological whitepaper
- Infographic on cost increase
- Link to PDAC crosswalk









Payor education progress

- All state Medicaid programs have been informed
 - CA Medicaid (Medi-Cal)
 - MI Medicaid
- Payor communication to DME provider networks



Proposed Policy Draft

Michigan Department of Health and Human Services
Health Services

Policy Subject: Coverage Changes to Intermittent Urinary Catheters

Affected Programs: Medicaid, Children's Special Health Care Services (CSHCS), Healthy Michigan Plan

Distribution: Medical Suppliers, Hospitals, Practitioners, Medicaid Health Plans, Integrated Care Organizations

Policy Summary: This policy changes coverage criteria for intermittent urinary catheters specific to hydrophilic-coated intermittent catheters.

Purpose: To implement new hydrophilic intermittent catheter codes effective January 1, 2026, and align coverage criteria with other payers.

Prior Authorization Requirements

Hydrophilic-coated intermittent catheters will no longer require prior authorization if the standards of coverage and documentation requirements are met. Prior authorization is required for medical need beyond the standards of coverage and for quantities above established program limits.



Internal education for DME providers is crucial and will help to ensure continued access to hydrophilic catheters

- Reviewing the catheter HCPCS changes with your team(s)
- Discussing the changes with your referral sources and clinicians
- Identifying hydro and non-hydro users
- Updating/obtaining new prescriptions
- Aligning pricing tables and other systems/processes
- Educating catheter users

Medicare coverage criteria: Proposed urological supplies local coverage determination (LCD)





Medicare will either update the existing Urological LCD or publish a new one

- 1. Non-discretionary LCD change
 - Add the new codes to the LCD without changing the clinical indications
 - No changes to the coverage criteria
 - No notice and comment period
- 2. Discretionary LCD change
 - Published proposed LCD to add or modify clinical indication criteria for catheters
 - Notice and comment period will be allowed (45 days)
 - Publication of the final LCD











Proposed Medicare Urological Supplies LCD (DL33803)

Urological Supplies

DL33803

Local Coverage Determination (LCD)

- LCD posted August 28, 2025
- Public meeting October 2, 2025
- Comment period end date October 11, 2025
- Final LCD publication date -- ??? --

Proposed LCD changes:

- No coverage criteria changes for hydrophilic catheters
- The addition of new HCPCS codes (A4295, A4296, A4297)
 for hydrophilic catheters
- Inclusion of an example of criteria for sterile intermittent urinary catheter kits (A4297, A4353) for beneficiaries with a spinal cord injury (any level)







Medical justification for the type of intermittent catheter prescribed must be present in the medical record

	•		•		
Straight intermittent catheter		nittent	Coude intermittent catheter Intermittent catheter with insertion supplies (closed or no touch system)		
Diagnosis of permanent urinary incontinence or permanent urinary retention		nence or	Diagnosis of permanent urinary incontinence or permanent urinary retention	Diagnosis of permanent urinary incontinence or permanent urinary retention	
			Medical need for a coude catheter	Beneficiary meets one of the five criteria: 1. Resides in nursing facility 2. Is immunosuppressed, for example (not all-inclu	sive)
	 2. Is immunosuppressed, for example (not all-inclusive) On immunosuppressive drugs post-transplant, On cancer chemotherapy, Has AIDS, Has a drug-induced state such as chronic oral corticosteroid use, Has a spinal cord injury at any level 		nt, orticosteroid use,		
			ming units hange in urgency, frequency dysreflexia, increased		

^{1.} Urological LCD: https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=40270&ver=19&bc=0

^{2.} Noridian - https://med.noridianmedicare.com/web/jddme/search-result/-/view/2230715/coverage-criteria-for-intermittent-urinary-catheters-a4353-immunosuppressed-beneficiaries-meeting-criteria-2







Allowable quantity for hydrophilic and non-hydrophilic catheters remains at up to 200 per month

	HCPCS	Description	Quantity per month
	A4295	Straight tip hydrophilic intermittent catheter	200
Hydrophilic	A4296	Coude tip hydrophilic intermittent catheter	200
	A4297	Closed system hydrophilic intermittent catheter kit	200
	A4351	Straight tip non-hydrophilic intermittent catheter	200
Non-hydrophilic -	A4352	Coude tip non-hydrophilic intermittent catheter	200
	A4353	Closed system non-hydrophilic intermittent catheter kit	200





Medicare Urological Local Coverage Determination and Policy Article

Requirements for coverage of catheters:¹

- ✓ Diagnosis of permanent urinary incontinence or permanent urinary retention must be present
 - ✓ Permanent impairment of urination
 - ✓ Does not mean there is no possibility that the beneficiary's condition may improve in the future
 - ✓ Condition is of long and indefinite duration

Urological Policy Article Update!²

- The updated language removes the specificity of the 3-month requirement of permanence however it does **not** remove the requirement of permanence
- Language aligns with the <u>Medicare Benefit Policy Manual</u>³ and the <u>Medicare Program Integrity Manual</u>⁴

Permanent= long and indefinite duration of 3 months or more



Permanent = long and indefinite duration







^{1.} Urological LCD: https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=33803&ver=47&bc=0

^{2.} Urological Policy Article: https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52521&ver=48

^{3.} Medicare Benefit Policy Manual (100-2 Chapter 15 Section 120): https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c01.pdf

^{4.} Medicare Program Integrity Manual (100-8 Chapter 5): https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/pim83c05.pdf

Medicare prescription guidance for hydrophilic catheters





Joint DME MAC publication provides guidance on prescriptions for new hydrophilic intermittent catheter HCPCS codes

- Guidance applies to both Noridian and CGS jurisdictions
- Published July 17, 2025

"Suppliers must discontinue use of A4351, A4352, and A4353 and utilize the new HCPCS codes A4295, A4296, and A4297 on claims for hydrophilic catheters with dates of service on or after January 1, 2026".

New prescription required

If the existing prescription includes a HCPCS code (A4351, A4352 or A4353), a new prescription is required. The new order can list the new HCPCS codes (A4295, A4296, or A4297), a general description (e.g., hydrophilic catheter), or a brand name / model.

New prescription <u>not required</u>

If the existing prescription is a general description (e.g., hydrophilic catheter), or brand name/model number, a new prescription is not required. Since the verbiage is a description of the new hydrophilic catheter HCPCS code(s), no new order is needed.





Proactively obtain new Standard Written Order(s)

Updating prescriptions now could eliminate the need for new orders on or after January 1, 2026!

- 1. Identify current hydrophilic catheter users
- 2. Update order templates
- 3. Send to clinicians for signature

TIP: Remove the HCPCS code and replace it with the description of the IC:

- ✓ IC type: straight, coude, or closed system
- ✓ Coating type: "hydrophilic" or "non-hydrophilic"





Clinicians can help to ensure catheter users do not experience product access challenges

What can clinicians do?

- Prescription renewals expect requests from DME providers
 - Exclude billing codes, include 'hydrophilic' or brand/item number
- Proactively update prescriptions for hydrophilic catheters
- Initiate conversations with their patients and/or DME providers
- Confirm with case managers as they work closely with DME providers
 - Educate staff on new HCPCS codes



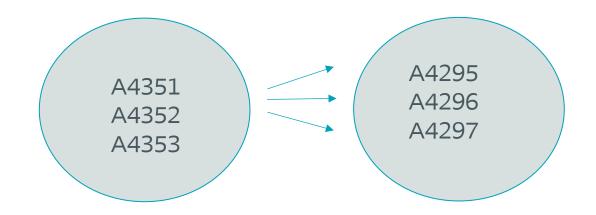
Next steps to prepare for the changes





Utilize the PDAC crosswalk to identify which catheters are changing HCPCS codes

- Crosswalk includes:
 - Manufacturer
 - Product Name
 - Model Number
 - Current HCPCS Code
 - Effective Begin Date
 - HCPCS Code (Effective 1/1/26)



Hydrophilic Intermittent Urinary Catheter Crosswalk - updated 6/25/2025



Additional recommendations

- Proactively communicate to your payors
- Monitor payor(s) fee schedule for early adoption
 - Some update 2026 fee schedule in Q4 2025
- Not all payors may adopt the new codes on January 01, 2026, therefore, update price tables or price files accordingly to avoid rejections/denials
 - Check with your software vendor
- Monitor secondary claims to Medicare as claims may cross over and the payor may not recognize the new code
 - January is deductible season
 - Manual cross-walking of the claims may be required until full adoption
 - Claims may pay based on coordination of benefit(s)
- Educate patients on the new code changes
 - Avoid confusion with explanation of benefits (EOB)







Resources

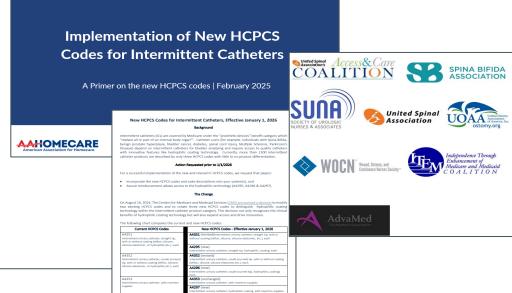




Available resources:

- AAHomeCare ICCRC website
- PDAC crosswalk
- Joint DME MAC prescription requirements
- HME news article
- Coloplast website
- ACU-Serve website





Documentation Requirements for New Urological Supplies Codes Joint DME MAC Publication

Effective for dates of service on or after January 1, 2026, CMS created three new HCPCS codes for hydrophilic catheters:

Code	Description
A4295	INTERMITTENT URINARY CATHETER; STRAIGHT TIP, HYDROPHILIC COATING, EACH
A4296	INTERMITTENT URINARY CATHETER; COUDE (CURVED) TIP, HYDROPHILIC COATING, EACH
A4297	INTERMITTENT URINARY CATHETER; HYDROPHILIC COATING, WITH INSERTION SUPPLIES

Prior to the creation of the new <u>HCPCS</u> codes, hydrophilic catheters were coded with <u>HCPCS</u> codes A4351 (INTERMITTENT URINARY CATHETER; STRAIGHT TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC, ETC.), EACH), A4352 (INTERMITTENT URINARY CATHETER; COUDE (CURVED) TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMERIC, OR HYDROPHILIC, ETC.), EACH), or A4353 (INTERMITTENT URINARY CATHETER, WITH INSERTION SUPPLIES). Suppliers must discontinue use of A4351, A4352, and A4353 and utilize the new <u>HCPCS</u> codes A4295, A4296, and A4297 on claims for hydrophilic catheters with dates of service on or after January 1, 2026.

- 1. ICCRC: https://aahomecare.org/Intermittent-Catheters
- 2. PDAC: PDAC Hydrophilic Intermittent Urinary Catheter Crosswalk
- 3. DME MAC joint publication: <u>Documentation Requirements for New Urological Supplies Codes JD DME Noridian</u>
- 4. HME Article: Countdown to coding change: CMS to updates HCPCS for hydrophilic caths
- 5. Coloplast: Continence Care Reimbursement
- 6. ACU-Serve: Enhance Your Healthcare Skills | ACU-Serve





Q & A



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~The recording of the webinar will be posted on Coloplast and ACU-Serve websites~



